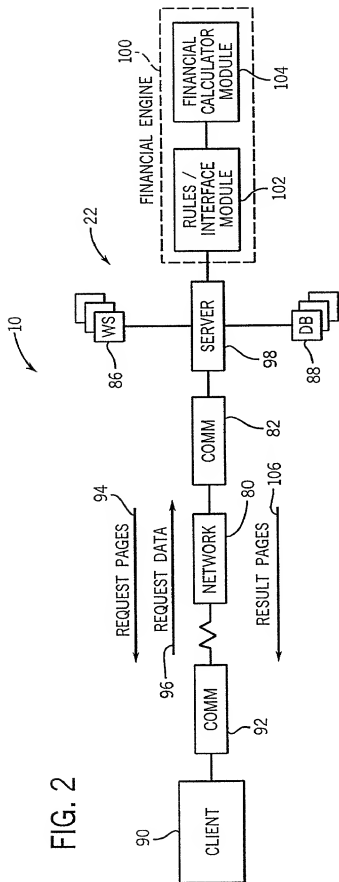
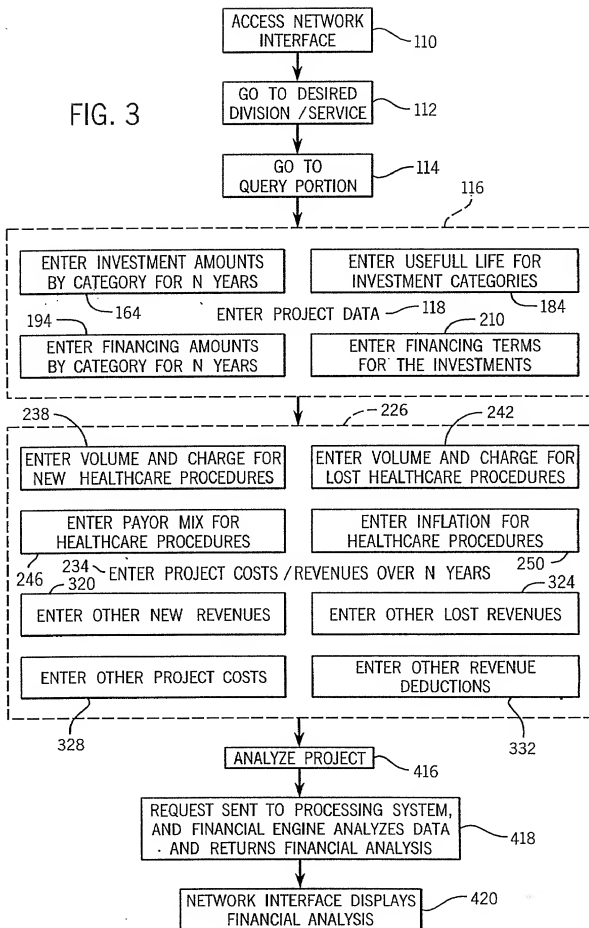


FIG. 1

FIG. 2





128 124 122 120 126

TM COMPANY NAME SERVICE 130

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PROJECT INFORMATION: 132 140 YOUR ROLE: ROLE 1 136

144 ENTITY / DEPT.: ENTITY 1 138 PROJECT NAME: PROJECT 1 142

160 PROJECTED START DATE: MONTH 152 YEAR 156 SALES TAX (%) ST 136

162 INTERNAL DISCOUNT RATE (%) IDR1 152 PROPERTY TAX (%) PTT 148

166 INVESTMENT AMTS: YR.0 YR.1 YR.2 YR.3 YR.4 YR.5 168

170 NEW CONSTRUCTION V1-0 V1-1 V1-2 V1-3 V1-4 V1-5 176

RENOVATION 172 V2-0 V2-1 V2-2 V2-3 V2-4 V2-5

EQUIPMENT 174 V3-0 V3-1 V3-2 V3-3 V3-4 V3-5

INVESTMENT #4 V4-0 V4-1 V4-2 V4-3 V4-4 V4-5

INVESTMENT #N VN-0 VN-1 VN-2 VN-3 VN-4 VN-5

182 TOTAL 178 TOT0 TOT1 TOT2 TOT3 TOT4 TOT5

190 ONGOING CAP. NEEDS VAL0 VAL1 VAL2 VAL3 VAL4 VAL5 176

192 USEFUL LIFE FOR EACH INVESTMENT: INV-CATEGORY 188 YEARS 180

192 FINANCING AMOUNTS: (\$) 208 FIN1 208 FIN2 208 FIN3 208 FIN4 208 FINN 206 TOT-FIN 220

170 NEW CONSTRUCTION 196

RENOVATION 172 198

EQUIPMENT 174 200

INVESTMENT #4 202

INVESTMENT #N 204

TOTAL 178 206

FINANCING TERMS: 212 186

INTEREST RATE (%) T1 214

TIME PERIOD (MONTHS) T2 218

TERM #3 224 T3

TERM #4 216 T4

TERM #N TN

IMPACT ON HEALTHCARE REVENUES 228

FIG. 4

230
124

128 TM COMPANY NAME 122

126 SERVICE 130

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NEW HEALTHCARE PROCEDURES: DESCRIPTION 1 252

236 PROJ. VOLUME 254	YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT 262	VOL1A	VOL2A	VOL3A	VOL4A	VOL5A
OUTPATIENT 264	VOL1B	VOL2B	VOL3B	VOL4B	VOL5B

256 CHARGE (\$) PER PROCEDURE:

INPATIENT 266	I-CHG				
OUTPATIENT 268	O-CHG				

270 ADD ANOTHER NEW
HEALTHCARE PROCEDURE 258

240 LOST HEALTHCARE PROCEDURES: DESCRIPTION 2 274

276 PROJ. VOLUME 280	YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT 282	LV1A	LV2A	LV3A	LV4A	LV5A
OUTPATIENT 284	LV1B	LV2B	LV3B	LV4B	LV5B

284 CHARGE (\$) PER PROCEDURE:

INPATIENT 286	LOST-IC				
OUTPATIENT 288	LOST-OC				

290 ADD ANOTHER LOST
HEALTHCARE PROCEDURE 294

244 PAYOR MIX:

INPATIENT: 298	YR.1	YR.2	YR.3	YR.4	YR.5
PAYOR #1	VI-1	VI-2	VI-3	VI-4	VI-5
PAYOR #N	VN-1	VN-2	VN-3	VN-4	VN-5
300 TOTAL 302	TOT1	TOT2	TOT3	TOT4	TOT5

OUTPATIENT:

YR.1	YR.2	YR.3	YR.4	YR.5
PAYOR #1	VI-1	VI-2	VI-3	VI-4
PAYOR #N	VN-1	VN-2	VN-3	VN-4
248 TOTAL 306	TOT1	TOT2	TOT3	TOT4

310 HEALTHCARE INFLATION:

YR.1	YR.2	YR.3	YR.4	YR.5
INPATIENT	I1-1	I1-2	I1-3	I1-4
312 OUTPATIENT	I2-1	I2-2	I2-3	I2-5

314 CONTINUE

316 BACK

FIG. 5

124

232

128 (TM) COMPANY NAME 122

126 SERVICE 130

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OTHER NEW REVENUES: DESCRIPTION 1 334

318 YR.1 REV1 336 YR.2 REV2 338 YR.3 REV3 340 YR.4 REV4 342 YR.5 REV5 344

ADD ANOTHER NEW REVENUE SOURCE 346

322 OTHER LOST REVENUES: DESCRIPTION 2 348

YR.1 LREV1 350 YR.2 LREV2 352 YR.3 LREV3 354 YR.4 LREV4 356 YR.5 LREV5 358

ADD ANOTHER LOST REVENUE SOURCE 360

326 OTHER COSTS OF PROJECT: DESCRIPTION 3 362

364 CODE #: VAL1 366 VARIABLE AND / OR FIXED: COST-TYPE1 370

VARIABLE COST VAL2 372 PER VARI 368

378 FIXED COST VAL3 380 PER PERIOD 1 376

INFLATION OF COSTS (%):

384 YR.1 INF1 386 YR.2 INF2 388 YR.3 INF3 390 YR.4 INF4 392 YR.5 INF5 394

ADD ANOTHER PROJECT COST 396

330 OTHER DEDUCTIONS FROM REVENUE:

DEDUCT	% REVENUE
CHARITY 398	DEDUCT 1 402
BAD DEBT 400	DEDUCT 2 404
DEDUCTION #3	DEDUCT 3 406
DEDUCTION #N	DEDUCT N 408

412 BACK 414 ANALYZE PROJECT 410 RESET

FIG. 6